

TOWN OF VERNON
BUILDING DEPARTMENT
55 West Main St
Vernon, Ct 06066
(860) 870-3633

DEMOLITION PERMIT APPLICATION

(Type or print all information except signature)

(For office use only)

Permit # _____ Zoning District _____

Application is:

☐ Approved ☐ Denied ☐ Denied without prejudice ☐ Affidavit required

Building Official

Date

Date: _____

Approximate cost of demolition \$ _____

Demolition site address _____

Age of building _____ years.

*Buildings 50 or more years old are subject to the Town of Vernon Demolition Delay Ordinance.

☐ Public Water ☐ Well ☐ Public Sewer ☐ Private sanitary system

Property Owner _____ Phone# _____

Address _____

Contractor's Name _____ Phone# _____

Address _____

☐ *Certificate of Registration # _____

☐ *Exemption from Certificate of Registration is claimed for:

☐ *Reconstruction of an Historic Building

☐ *Demolition of a farm building

☐ *Demolition of a single family building by owner

☐ *Certificate of Insurance # _____

(see instruction section)

* Public utilities certificates of disconnection and other required notices:

- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Public Water | <input type="checkbox"/> Abandon private well | <input type="checkbox"/> Public sewer |
| <input type="checkbox"/> Disconnect septic system | <input type="checkbox"/> Electric service | <input type="checkbox"/> Cable TV |
| <input type="checkbox"/> Telephone company | <input type="checkbox"/> Natural Gas Company | |
| <input type="checkbox"/> Propane Gas company | <input type="checkbox"/> Copy of letters to abutting owners | |
| <input type="checkbox"/> Other, be specific _____ | | |
| <input type="checkbox"/> Call before you dig # _____ | | |
| <input type="checkbox"/> Building materials disposal site(s): | | |
| Site #1 _____ | | |
| Site #2 _____ | | |
| Site #3 _____ | | |
| <input type="checkbox"/> Proof of Worker's Compensation Insurance | | |
| Insurance policy # _____ | | |
| <input type="checkbox"/> State agency for asbestos abatement notification _____ | | |

*Additional safety devices may be required by the Building Official:

- ☐ Fence 8' high ☐ Sidewalk shed ☐ Other _____

Type of building or structure:

- | | | |
|--|--|-------------------------------------|
| <input type="checkbox"/> Single family dwelling | <input type="checkbox"/> Two or more family dwelling units: Specify # of units _____ | |
| <input type="checkbox"/> Shed | <input type="checkbox"/> Private Garage | |
| <input type="checkbox"/> Office Building | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Restaurant |
| <input type="checkbox"/> Retail Sales | <input type="checkbox"/> Institutional | |
| <input type="checkbox"/> Swimming Pool: | <input type="checkbox"/> Public | <input type="checkbox"/> Private |
| <input type="checkbox"/> Other, be specific: _____ | | |

BOTH PROPERTY OWNER AND CONTRACTOR MUST SIGN AND DATE:

Owner's Name (print): _____

Signature: _____

Contractor (print): _____

Signature: _____

***See instruction section next page**

INSTRUCTIONS
**THE FOLLOWING DOCUMENTS MUST BE SUBMITTED WITH THE
DEMOLITION PERMIT APPLICATION**

TOWN OF VERNON DEMOLITION DELAY ORDINANCE #198

Buildings that are 50 or more years old are subject to this ordinance. Complete the Demolition Application available from the Building Department. The demolition will not commence until the Historic Properties Commission and or the municipal Historian has decided to waive the demolition delay or institute a 90 day demolition delay.

CERTIFICATE OF REGISTRATION

Connecticut General Statutes (CGS) 29-402 requires all demolition contractors to obtain a certificate of registration from the Department of Public Safety, 1111 Country Club Road, Middletown, Connecticut 06457-9294, phone (860) 685-8310.

EXEMPTION FROM CERTIFICATE OF REGISTRATION is claimed for the following:

- Reconstruction of an Historic Building
- Demolition of a farm building by owner
- Renovation, alteration or reconstruction of a single-family residence by owner
- Demolition of a single-family building or out building by owner provided:
Building does not exceed 30 feet in height.
Owner shall be present during demolition.
Owner shall be personally responsible for any injuries.
Clearance from other structures, roads or highways are equal to or
Greater than the height of the building being demolished.
Building Official may require additional clearances.

CERTIFICATE OF INSURANCE as required by CGS 209-406 shall specify in writing the following:

- Insurance is specifically for demolition
- Liability for bodily injury \$100,000 per person minimum and \$300,000 aggregate
- Property damage \$50,000 per accident and \$100,000 aggregate
- The Town of Vernon shall be held harmless from any claim and listed as Additional Insured
- Must state the property address of building to be demolished

SUBMIT LETTER OF DISCONNECTION OR OTHER REQUIRED NOTICES FROM:

If all pertinent documentation is not submitted with the application for a demolition permit, the application will be summarily denied without prejudice.

NOTICE!

PURSUANT TO THE CONNECTICUT GENERAL STATUTES, DEPARTMENT OF
ENVIRONMENTAL PROTECTION AGENCY, STATE HEALTH DEPARTMENT
REGULATIONS, AND THE TOWN OF VERNON ZONING REGULATIONS, NO ON-SITE
BURIAL OF ANY BUILDING MATERIALS IS PERMITTED.